



# City of Alpharetta Commercial Permit Applications

Revised: January 1, 2012

## NOTICE

The information within this document is prepared by the City of Alpharetta Georgia Community Development Department, Inspections and Codes Enforcement Division, hereinafter referred to as “the City.” The intent of this document is to reasonably inform our citizens, designers, developers, contractors, and the general public of the codes and laws related to commercial building construction in effect within the city and also to communicate the policies and procedures developed by the city over time to enforce these laws for safe and code compliant commercial construction.

This document is a building official interpreted “plain language” compilation of various sections of federal, state, county, and city building construction laws and the rules and regulations related to improving commercial property in the City. The information within is not all inclusive, nor is it designed to be, but rather presents a general overview of construction laws and processes relative to planning, permitting, constructing, inspecting, and completing a commercial construction project in the city.

For the purpose of this document, the following shall apply to the use of words and phrases: Words used in present tense include future tense. Words used in singular tense include plural tense. The word “he” also means “she.” The words “shall” or “must” are always mandatory. The words “may” or “can” are permissive. The word “and” indicates all conditions, requirements, or factors so connected must be met or fulfilled, whereas the word “or” indicates that at least one condition, requirement, or factor so connected must be met. The word “structure” means anything that is built and includes the word “building.” The word “person” means any individual, corporation, association, firm, partnership or other legal entity. The word “permit” means written governmental permission issued by an authorized official, empowering the holder thereof to do some act not forbidden by law, but not allowed without such authorization.

This document may be updated as codes, laws, rules, regulations, and policies change. This document has been prepared by the City of Alpharetta Building Official, and specific requirements and policies not mandated by law may be modified or waived by the Building Official. This and other construction related procedures may be accessed and downloaded at: [www.alpharetta.ga.us](http://www.alpharetta.ga.us).

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## BUILDING PERMIT APPLICATION NEW CONSTRUCTION or ADDITION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

**ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY**

Application Date: \_\_\_\_\_ Applicant is: ☐ Owner / Agent ☐ Contractor / Agent

Work is: ☐ New Building / Structure ☐ Addition

City LDP No: \_\_\_\_\_ Sewer Permit No: \_\_\_\_\_ City Impact Rcpt. No: \_\_\_\_\_

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

City Zoning District: \_\_\_\_\_ Land Lot: \_\_\_\_\_ District: \_\_\_\_\_ Section: \_\_\_\_\_

Front Setback: \_\_\_\_\_ ft. Left Side Setback: \_\_\_\_\_ ft. Right Side Setback: \_\_\_\_\_ ft. Rear Setback: \_\_\_\_\_ ft.

Flood Plain Lot – Lower Floor Elevation: \_\_\_\_\_ MSL – *Note: FEMA Elevation Letter Required Prior to CO.*

### PEOPLE INFORMATION

**Property Owner:** \_\_\_\_\_ Tel. No: ( ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Contractor:** \_\_\_\_\_ Tel. No: ( ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration No: \_\_\_\_\_ Where Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION

**Project Name:** \_\_\_\_\_

Briefly Describe Work: \_\_\_\_\_

Building Height: \_\_\_\_\_ ft No. Stories: \_\_\_\_\_ Fire Sprinkled: Y \_\_\_\_\_ N \_\_\_\_\_ Max Live Load / FL \_\_\_\_\_ psf.

Foundation is: ☐ Slab-on-Grade ☐ Crawlspace ☐ Basement ☐ Other \_\_\_\_\_

Associated Work? ☐ Mechanical ☐ Electrical ☐ Plumbing ☐ Low Voltage ☐ Grease Trap

Primary Use Group: \_\_\_\_\_ Use: \_\_\_\_\_ Type of Const: ☐ 1A ☐ 1B ☐ 2A ☐ 2B ☐ 3A ☐ 3B ☐ 4 ☐ 5A ☐ 5B

Applicant Printed Name: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_



## SHELL BUILDING PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

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Application Date: \_\_\_\_\_ Applicant is: ☐ Owner / Agent ☐ Contractor / Agent

Work is: ☐ New Building / Structure ☐ Addition

City LDP No: \_\_\_\_\_ Sewer Permit No: \_\_\_\_\_ City Impact Rcpt. No: \_\_\_\_\_

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

City Zoning District: \_\_\_\_\_ Land Lot: \_\_\_\_\_ District: \_\_\_\_\_ Section: \_\_\_\_\_

Front Setback: \_\_\_\_\_ ft. Left Side Setback: \_\_\_\_\_ ft. Right Side Setback: \_\_\_\_\_ ft. Rear Setback: \_\_\_\_\_ ft.

Flood Plain Lot – Lower Floor Elevation: \_\_\_\_\_ MSL – *Note: FEMA Elevation Letter Required Prior to CO.*

### PEOPLE INFORMATION

**Property Owner:** \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Contractor:** \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration No: \_\_\_\_\_ Where Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION

**Project Name:** \_\_\_\_\_

Briefly Describe Work: \_\_\_\_\_

Building Height: \_\_\_\_\_ ft No. Stories: \_\_\_\_\_ Fire Sprinkled: Y \_\_\_\_ N \_\_\_\_ Max Live Load / FL \_\_\_\_\_ psf.

Foundation is: ☐ Slab-on-Grade ☐ Crawlspace ☐ Basement ☐ Other \_\_\_\_\_

Associated Work? ☐ Mechanical ☐ Electrical ☐ Plumbing ☐ Low Voltage ☐ Grease Trap

Primary Use Group: \_\_\_\_\_ Use: \_\_\_\_\_ Type of Const: ☐ 1A ☐ 1B ☐ 2A ☐ 2B ☐ 3A ☐ 3B ☐ 4 ☐ 5A ☐ 5B

Applicant Printed Name: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_



## INTERIOR FINISH (ONLY) BUILDING PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

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Application Date: \_\_\_\_\_ Applicant is: ☐ Owner / Agent ☐ Contractor / Agent

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

### PEOPLE INFORMATION

Property Owner: \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor: \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration No: \_\_\_\_\_ Where Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION

Project Name: \_\_\_\_\_

Briefly Describe Work: \_\_\_\_\_

Building Height: \_\_\_\_\_ ft No. Stories: \_\_\_\_\_ Fire Sprinkled: Y \_\_\_\_\_ N \_\_\_\_\_ Max Live Load / FL \_\_\_\_\_ psf.

Foundation is: ☐ Slab-on-Grade ☐ Crawlspace ☐ Basement ☐ Other \_\_\_\_\_

Associated Work? ☐ Mechanical ☐ Electrical ☐ Plumbing ☐ Low Voltage ☐ Grease Trap

Primary Use Group: \_\_\_\_\_ Use: \_\_\_\_\_ Type of Const: ☐ 1A ☐ 1B ☐ 2A ☐ 2B ☐ 3A ☐ 3B ☐ 4 ☐ 5A ☐ 5B

Second Generation Interior Finish Square Footage: \_\_\_\_\_

Second Generation Interior Finish Construction Cost: \$ \_\_\_\_\_

Applicant Printed Name: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_



## DEMOLITION PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

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Application Date: \_\_\_\_\_ Applicant is: ☐ Owner / Agent ☐ Contractor / Agent

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

### PEOPLE INFORMATION

Property Owner: \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor: \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration No: \_\_\_\_\_ Where Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION

Project Name: \_\_\_\_\_

Briefly Describe Work: \_\_\_\_\_

Associated Work? ☐ Mechanical ☐ Electrical ☐ Plumbing ☐ Gas Other: \_\_\_\_\_

Primary Use Group: \_\_\_\_\_ Use: \_\_\_\_\_ Type of Const: ☐ 1A ☐ 1B ☐ 2A ☐ 2B ☐ 3A ☐ 3B ☐ 4 ☐ 5A ☐ 5B

Whole Building Demolition Fee = \$300.00

Partial Building or Structure Demolition Fee = \$200.00

Applicant Printed Name: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_



## FOUNDATION ONLY PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

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Application Date: \_\_\_\_\_ Applicant is: ☐ Owner / Agent ☐ Contractor / Agent

City LDP No: \_\_\_\_\_ Sewer Permit No: \_\_\_\_\_ City Impact Rcpt. No: \_\_\_\_\_

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

City Zoning District: \_\_\_\_\_ Land Lot: \_\_\_\_\_ District: \_\_\_\_\_ Section: \_\_\_\_\_

Front Setback: \_\_\_\_\_ ft. Left Side Setback: \_\_\_\_\_ ft. Right Side Setback: \_\_\_\_\_ ft. Rear Setback: \_\_\_\_\_ ft.

### PEOPLE INFORMATION

**Property Owner:** \_\_\_\_\_ Tel. No: ( ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Contractor:** \_\_\_\_\_ Tel. No: ( ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration No: \_\_\_\_\_ Where Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION

**Project Name:** \_\_\_\_\_

Briefly Describe Work: \_\_\_\_\_

Building Height: \_\_\_\_\_ ft No. Stories: \_\_\_\_\_ Fire Sprinkled: Y \_\_\_\_\_ N \_\_\_\_\_ Max Live Load / FL \_\_\_\_\_ psf.

Foundation is: ☐ Slab-on-Grade ☐ Crawlspace ☐ Basement ☐ Other \_\_\_\_\_

Associated Work? ☐ Mechanical ☐ Electrical ☐ Plumbing ☐ Low Voltage ☐ Grease Trap

Primary Use Group: \_\_\_\_\_ Use: \_\_\_\_\_ Type of Const: ☐ 1A ☐ 1B ☐ 2A ☐ 2B ☐ 3A ☐ 3B ☐ 4 ☐ 5A ☐ 5B

Applicant Printed Name: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_





## SITE WALL PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

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Application Date: \_\_\_\_\_ Applicant is: ☐ Owner / Agent ☐ Contractor / Agent

City LDP No: \_\_\_\_\_ Sewer Permit No: \_\_\_\_\_ City Impact Rcpt. No: \_\_\_\_\_

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

City Zoning District: \_\_\_\_\_ Land Lot: \_\_\_\_\_ District: \_\_\_\_\_ Section: \_\_\_\_\_

Front Setback: \_\_\_\_\_ ft. Left Side Setback: \_\_\_\_\_ ft. Right Side Setback: \_\_\_\_\_ ft. Rear Setback: \_\_\_\_\_ ft.

### PEOPLE INFORMATION

**Property Owner:** \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Contractor:** \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration No: \_\_\_\_\_ Where Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

### WORK INFORMATION

**Project Name:** \_\_\_\_\_

Briefly Describe Work: \_\_\_\_\_

Associated Work? ☐ Electrical ☐ Plumbing ☐ Other: \_\_\_\_\_

**Construction Valuation for Calculating Permit Fees:** \_\_\_\_\_

**Note:** Block and Wood wall construction, where using dead-man, geo-grid, or similar stabilization methods, are subject to **IBC Chapter 17 – Special Inspections** provisions. Submit Inspector Credentials for Building Official review at plan review submission.

**Applicant Printed Name:** \_\_\_\_\_ **Applicant Signature:** \_\_\_\_\_



## GREASE TRAP PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a building or structure as described herein and shown on City code compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

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Application Date: \_\_\_\_\_ Applicant is: ☐ Owner / Agent ☐ Contractor / Agent

### GENERAL INFORMATION

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### PEOPLE INFORMATION

**Property Owner:** \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Contractor:** \_\_\_\_\_ Tel. No: (     ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration No: \_\_\_\_\_ Where Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

Ga. Card No: \_\_\_\_\_ Class: \_\_\_\_\_ Expires: \_\_\_\_\_ Card Holder: \_\_\_\_\_

### WORK INFORMATION

**Project Name:** \_\_\_\_\_

Project Type: ☐ Restaurant ☐ Sandwich Shop / Bakery / Grocery ☐ Convenience Store ☐ Other: \_\_\_\_\_

Grease Trap Location: ☐ Above Grade ☐ Below Grade      Number of Grease Traps: \_\_\_\_\_

Size of Grease Traps: ( gal / # ) \_\_\_\_\_

\* If grease traps are for a future tenant in a shell building, provide LDP number: \_\_\_\_\_

\* Fees are \$25.00 per grease trap installed!

**Applicant Printed Name:** \_\_\_\_\_ **Applicant Signature:** \_\_\_\_\_



## TEMPORARY USE PERMIT

**INSTRUCTIONS:** Check box to left of use requested. Permit will be issued or denied within 30 days of receipt of all required information, signatures, and fees. *Do not proceed with the temporary use without first having a permit in hand.*

*Copy of Temporary Use Permit must be on site and available to city enforcement and fire officials upon demand.*

### TYPES OF TEMPORARY USE

### Fee Schedule

- |  |                          |
|--|--------------------------|
| <input type="checkbox"/> Construction Trailer, Office or Equipment Shed - 1 year time limit, Director may renew annually.<br>Floor plan, foundation & tie-down plan, and site location plan required. Inspection required before use.                              | \$100 per office/trailer |
| <input type="checkbox"/> Real Estate Sales/Hiring Office - 1 year time limit, Director may renew annually.<br>Floor plan, foundation & tie-down plan, and site location plan required. Inspection required before use.   | \$100 per office/trailer |
| <input type="checkbox"/> Tent sale or temporary structure - 45 day limit twice per calendar year   | \$200*                   |
| <input type="checkbox"/> Open Christmas tree Lot - 45 day time limit off street parking plan required. <b>AG, O-I C-1, C-2, L-I Zones Only</b>   | \$100                    |
| <input type="checkbox"/> Fruit / Vegetable Stand - 45 day time limit off street parking plan required. <b>AG, O-I C-1, C-2, L-I Zones Only</b>   | \$100                    |
| <input type="checkbox"/> Seasonal Sales - 90 day time limit.<br>Business must be seasonal in nature and conducted within an existing permanent structure.<br>Seasonal Sales Permits may not be renewed for a period of 180 days from the date of permit expiration | \$100                    |
| <input type="checkbox"/> Carnival, Circus, or Fair - 4 day time limit.<br>Time limits may be increased to 21 days with prior approval by City Council.   | \$100                    |
| <input type="checkbox"/> Religious Meetings in Temporary Structures - 60 day time limit. <b>AG, R-10M, CUP, O-I, C-1, C-2 Zones Only</b>   | \$200*                   |
| <input type="checkbox"/> Temporary Antenna - 60 day time limit limited to a special event or to meet a seasonal or temporary demand.   | \$100                    |
| <input type="checkbox"/> Commercial Filming Activity. - 7 day time limit. <b>Contact Office of Special Events at 678-297-6078</b>  |                          |

### **Notes Related to ALL Temporary Uses**

**All applications require a site plan to be submitted at time of application.**

**All applications are subject to further limitations, as may be determined.**

**If electrical power is required for Temporary Use, electrical permit & inspections are required.**

**Tents cannot block fire lanes or Handicap parking. Fire Marshal inspection required.**

Street Address: \_\_\_\_\_ Suite/Unit: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Use Start Date: \_\_\_\_\_ Use End Date: \_\_\_\_\_  
Property Owner Name: \_\_\_\_\_ Tel. No.: \_\_\_\_\_  
Property Owner Signature Authorizing Use \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Tel No.: \_\_\_\_\_  
Applicant Permanent Address: \_\_\_\_\_ Unit / Suite: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_  
Signature: \_\_\_\_\_

\* Includes 100.00 Fire Marshall Inspection fee



## TEMPORARY ELECTRICAL SERVICE REQUEST APPLICATION

Request for temporary approval of electric service conductors and service switch

Date: \_\_\_\_\_ Building Permit Number: \_\_\_\_\_  
Project: \_\_\_\_\_ Suite: \_\_\_\_\_  
Project Address: \_\_\_\_\_  
Number of day's temp service requested: \_\_\_\_\_  
Utility Provider: \_\_\_\_\_

### **This system is requested for machinery and equipment testing**

1. The general contractor thereby assumes all responsibility for any use of electricity in the structure during the temporary period. Any extension of the temporary approval shall be thru re-application submittal.
2. This Temporary Conditional Electric Service is being given as a convenience for the Contractor / Permit Holder. Violation, such as any unapproved occupancy or use of power for other purposes than being requested, will be considered sufficient cause for the power to be terminated, as well as denial of future request for Temporary Power by the Contractor / Permit Holder. The City of Alpharetta also reserves the right to have the temporary power removed at any time it feels that the safety of workers or any other persons may be in danger due to the Temporary Electrical Power.

### **Contractors Statement:**

I / We relieve the City of Alpharetta and its employees from any and all liability for damages or loss due to the temporary electrical service approval.

Date: \_\_\_\_\_  
Signed by: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_

### **Electrical Contractors Statement:**

The service equipment for which approval is being applied for has been installed in accordance with applicable codes and is ready for inspection.

Date: \_\_\_\_\_ Company Name: \_\_\_\_\_  
Electrical Contractor Printed Name: \_\_\_\_\_  
Electrical Contractor Signature: \_\_\_\_\_  
Card #: \_\_\_\_\_ Class: \_\_\_\_\_ Expiration: \_\_\_\_\_

Community Development Department – Inspections & Code Enforcement Division  
287 South Main Street, Alpharetta, GA 30009 – Tel: 678-297-6080 Fax: 678-297-6081  
Revised: January 1, 2012

# MECHANICAL PERMIT APPLICATION

City of Alpharetta  
287 South Main Street  
Alpharetta, GA 30009  
Telephone: 678-297-6080



TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition / alteration / replacement
<input type="checkbox"/> Demolition	<input type="checkbox"/> Other:
GENERAL INFORMATION	
<input type="checkbox"/> Residential 1&2 Family Dwelling / Townhouse	<input type="checkbox"/> Commercial or Multi-Family
General Contractor:	Building Permit No:
JOB SITE INFORMATION AND LOCATION	
Job Site Address:	
City / State / Zip:	
Suite / Building / Apt. No:	Project Name:
Subdivision:	Lot Number:
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name:	
Work Site Street Address:	
City / State / Zip:	
Phone: (    )	Fax: (    )
<input type="checkbox"/> APPLICANT <input type="checkbox"/> CONTACT PERSON	
Business Name:	
Contact Name:	
Address:	
City / State / Zip:	
Phone: (    )	Fax: (    )
E-mail:	
Applicant Signature:	
Print Name:	
CONTRACTOR	
Business Name:	
Address:	
City / State / Zip:	
Phone: (    )	Fax: (    )
Business Registration Number:	
Georgia Card Number:	Expires:
Card Holder:	
Card Holder Signature:	
Print Name:	

FEE SCHEDULE			
Whole House / Apt. / Condo HVAC single system fees shall apply to each separate Single Family Dwelling Unit or Apt. / Condo Unit. Fee = \$100.00			
Total Units:            x \$100.00 =			
* COMMERCIAL *			
Description	Qty.	Ea.	Total
Additional AC System		\$2.00/ton	
0-5 Ton Single System		\$50.00 ea.	
PTAC Unit		\$50.00 ea.	
Split System		\$50.00 ea.	
Heat Sys. 0-150M Btu.		\$75.00 ea.	
Additional Heat System		\$.50M btu	
Unit heaters (fuel type) in-wall,duct, suspended.		\$0.20/Mbtu	
PIU & VAV Units		\$5.00 ea.	
Ductwork Systems		\$50.00 ea.	
Chiller / Refrig. Unit		\$50.00 ea.	
Type 1 & 2 Commercial Hood Systems		\$2.00 sq. ft	
Inlet / Exhaust Air Sys.		\$0.02 / cfm	
Clothes Dryer Exhaust		\$5.00 ea.	
Smoke / Fire Dampers		\$4.00 ea.	
Other:			
* RESIDENTIAL *			
Description	Qty.	Ea.	Total
Additional HVAC Sys.			
0 - 5 Ton Single System		\$50.00 ea.	
Space Heater 0 - 150M		\$25.00 ea.	
Exhaust/Dryer Vent		\$5.00 ea.	
Misc. Ductwork System		\$50.00 ea.	
Furnace Replacement		\$50.00 ea.	
Compressor - Replace		\$50.00 ea.	
Smoke / Fire Dampers		\$4.00 ea.	
Fuel Gas Outlet		\$5.00 ea.	
Basement Finish		\$50.00 ea.	
Other:			
*MECHANICAL PERMIT FEES*			
Subtotal:			
Minimum Permit Fee: \$50.00			
TOTAL PERMIT FEE			

Application Date: \_\_\_\_\_

Revised: January 1, 2012

# ELECTRICAL PERMIT APPLICATION

City of Alpharetta  
287 South Main Street  
Alpharetta, GA 30009  
Telephone: 678-297-6080



TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition / alteration / replacement
<input type="checkbox"/> Demolition	<input type="checkbox"/> Other:
<b>GENERAL INFORMATION</b>	
<input type="checkbox"/> Residential 1&2 Family Dwelling / Townhouse <input type="checkbox"/> Commercial or Multi-Family	
General Contractor:	Building Permit No:
<b>JOB SITE INFORMATION AND LOCATION</b>	
Job Site Address:	
City / State / Zip:	
Suite / Building / Apt. No:	Project Name:
Subdivision:	Lot Number:
<b>DESCRIPTION OF WORK</b>	
<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name:	
Work Site Street Address:	
City / State / Zip:	
Phone: ( )	Fax: ( )
<input type="checkbox"/> APPLICANT <input type="checkbox"/> CONTACT PERSON	
Business Name:	
Contact Name:	
Address:	
City / State / Zip:	
Phone: ( )	Fax: ( )
E-mail:	
Applicant Signature:	
Print Name:	
<b>CONTRACTOR</b>	
Business Name:	
Address:	
City / State / Zip:	
Phone: ( )	Fax: ( )
Business Registration Number:	
Georgia Card Number:	Expires:
Card Holder Signature:	
Print Name:	

FEE SCHEDULE			
<b>Whole House / Apt. / Condo Electrical system fees</b>			
shall apply to each separate Single Family Dwelling Unit or Apt. / Condo Unit. <b>Fee = \$100.00</b>			
<b>Total Units: x \$100.00 =</b>			
<b>* COMMERCIAL *</b>			
<i>Description</i>	<i>Qty.</i>	<i>Ea.</i>	<i>Total</i>
Temporary Power Pole		\$50.00 ea.	
0-400A Service System		\$75.00 ea.	
401-1000A Service System		\$100.00 ea.	
1001A + Service System		\$125.00 ea.	
Transformers		\$5.00 ea.	
Motors		\$5.00 ea.	
Equipment Disconnects		\$4.00 ea.	
Wall Outlets		\$1.00 ea.	
Switches		\$1.00 ea.	
Light Fixtures		\$1.00 ea.	
PIU & VAV		\$5.00 ea.	
Exhaust Fans		\$5.00 ea.	
Swimming Pools		\$50.00 ea.	
Sign Electrical		\$50.00 ea.	
Other:			
<b>* RESIDENTIAL *</b>			
<i>Description</i>	<i>Qty.</i>	<i>Ea.</i>	<i>Total</i>
Temporary Power Pole		\$25.00 ea.	
0-200A Additional Panel		\$40.00 ea.	
Service Change-Out			
0-200A Service Panel		\$50.00 ea.	
Wall Outlets		\$1.00 ea.	
Switches		\$1.00 ea.	
0-200A Additional Panel		\$40.00 ea.	
Light Fixtures		\$1.00 ea.	
Ceiling Fans		\$5.00 ea.	
Exhaust Fans		\$5.00 ea.	
Appliance / Equipment		\$5.00 ea.	
Swimming Pool		\$50.00 ea.	
Basement Finish		\$50.00 ea.	
Other:			
<b>ELECTRICAL PERMIT FEES</b>			
<b>Subtotal:</b>			
Minimum Permit Fee: \$50.00			
<b>TOTAL PERMIT FEE</b>			

Application Date: \_\_\_\_\_

Revised: January 1, 2012

# LOW VOLTAGE PERMIT APPLICATION

City of Alpharetta  
287 South Main Street  
Alpharetta, GA 30009  
Telephone: 678-297-6080



TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition / alteration / replacement
<input type="checkbox"/> Demolition	<input type="checkbox"/> Other:
GENERAL INFORMATION	
<input type="checkbox"/> Residential 1&2 Family Dwelling / Townhouse	<input type="checkbox"/> Commercial or Multi-Family
General Contractor:	Building Permit No:
JOB SITE INFORMATION AND LOCATION	
Job Site Address:	
City / State / Zip:	
Suite / Building / Apt. No:	Project Name:
Subdivision:	Lot Number:
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name:	
Work Site Street Address:	
City / State / Zip:	
Phone: (   )	Fax: (   )
<input type="checkbox"/> APPLICANT <input type="checkbox"/> CONTACT PERSON	
Business Name:	
Contact Name:	
Address:	
City / State / Zip:	
Phone: (   )	Fax: (   )
E-mail:	
Applicant Signature:	
Print Name:	
CONTRACTOR	
Business Name:	
Address:	
City / State / Zip:	
Phone: (   )	Fax: (   )
Business Registration Number:	
Georgia Card Number:	Expires:
Card Holder Signature:	
Print Name:	

FEE SCHEDULE			
<b>Whole House / Apt. / Condo Low Voltage system fees</b>			
shall apply to each separate Single Family Dwelling Unit or Apt. / Condo Unit. <b>Fee = \$100.00</b>			
<b>Total Units:      x \$100.00 =</b>			
* COMMERCIAL *			
Description	Qty.	Ea.	Total
Telephone System			
Includes 1 - 20 Outlets		\$50.00 ea.	
Additional Phone Outlets		\$1.00 ea.	
Data System			
Includes 1 - 20 Outlets		\$50.00 ea.	
Additional Data Outlets		\$1.00 ea.	
Security Systems			
Includes 1 - 20 Outlets		\$50.00 ea.	
Additional Security Outlets		\$1.00 ea.	
Fire Alarm System			
Includes 1 - 20 Outlets		\$50.00 ea.	
Additional Alarm Outlets		\$1.00 ea.	
CATV Systems			
Includes 1 - 20 Outlets		\$50.00 ea.	
Additional CATV Outlets		\$1.00 ea.	
Other:			
* RESIDENTIAL *			
Description	Qty.	Ea.	Total
Phone System		\$50.00 ea.	
Data System		\$50.00 ea.	
Security System		\$50.00 ea.	
Fire Alarm System		\$50.00 ea.	
CATV System		\$50.00 ea.	
Basement Finish		\$50.00 ea.	
Other:			
LOW VOLTAGE PERMIT FEES			
<b>Subtotal:</b>			
Minimum Permit Fee: \$50.00			
<b>TOTAL PERMIT FEE</b>			

Application Date: \_\_\_\_\_

Revised: January 1, 2012

# PLUMBING PERMIT APPLICATION

City of Alpharetta  
287 South Main Street  
Alpharetta, GA 30009  
Telephone: 678-297-6080



TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition / alteration / replacement
<input type="checkbox"/> Demolition	<input type="checkbox"/> Other:
GENERAL INFORMATION	
<input type="checkbox"/> Residential 1&2 Family Dwelling / Townhouse <input type="checkbox"/> Commercial or Multi-Family	
General Contractor:	Building Permit No:
JOB SITE INFORMATION AND LOCATION	
Job Site Address:	
City / State / Zip:	
Suite / Building / Apt. No:	Project Name:
Subdivision:	Lot Number:
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name:	
Work Site Street Address:	
City / State / Zip:	
Phone: ( )	Fax: ( )
<input type="checkbox"/> APPLICANT <input type="checkbox"/> CONTACT PERSON	
Business Name:	
Contact Name:	
Address:	
City / State / Zip:	
Phone: ( )	Fax: ( )
E-mail:	
Applicant Signature:	
Print Name:	
CONTRACTOR	
Business Name:	
Address:	
City / State / Zip:	
Phone: ( )	Fax: ( )
Business Registration Number:	
Georgia Card Number:	Expires:
Card Holder:	
Card Holder Signature:	
Print Name:	

FEE SCHEDULE			
<b>Whole House / Apt. / Condo Plumbing system fees</b>			
shall apply to each separate Single Family Dwelling Unit or Apt. / Condo Unit. <b>Fee = \$100.00</b>			
<b>Total Units:            x \$100.00 =           </b>			
* COMMERCIAL & RESIDENTIAL *			
Description	Qty.	Ea.	Total
Toilet / Urinal		\$5.00 ea.	
Tub / Shower		\$5.00 ea.	
Additional 1/2 Bath		\$25.00 ea.	
Lavatory Sink		\$5.00 ea.	
Kitchen /Break Rm.Sink		\$5.00 ea.	
Bar / Medical Sink		\$5.00 ea.	
Laundry / Mop Sink		\$5.00 ea.	
Hose Bibb w/ VB		\$5.00 ea.	
Drinking Fountain		\$5.00 ea.	
Dishwasher		\$5.00 ea.	
Floor / Hub Drain		\$5.00 ea.	
Roof Drain		\$5.00 ea.	
Irrigation Meter		\$50.00 ea.	
Misc. Fixture / Outlet		\$5.00 ea.	
Fuel Gas Outlet		\$5.00 ea.	
Medical Gas Outlet		\$5.00 ea.	
Water Heater / Boiler		\$25.00 ea.	
Basement Finish		\$50.00 ea.	
Ejector / Sump Pump		\$25.00 ea.	
Water Wells		\$50.00 ea.	
Gray Water System		\$50.00 ea.	
Sewer Install / Repair		\$50.00 ea.	
Water Install / Repair		\$50.00 ea.	
Other:			
PLUMBING PERMIT FEES			
<b>Subtotal:</b>			
Minimum Permit Fee: \$50.00			
<b>TOTAL PERMIT FEE</b>			
* Grease Traps can not be permitted on this form.			
See Grease Trap Permit Application Form.			

Application Date: \_\_\_\_\_

Revised: January 1, 2012